

DECLARATION AND POWER OF ATTORNEY FOR U.S. PATENT APPLICATIONS

☒ Original ☐ Supplemental ☐ Substitute ☐ PCT

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if more than one name is listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

Hydroxydiphenyl ether compounds

which is described and claimed in:

- ☒ the attached specification.
- ☐ the specification in U.S. Application No. _____
filed _____, and as amended on _____ (if applicable).
(day/month/year) (day/month/year)
- ☐ the specification in International Application No. **PCT/**
filed _____
(day/month/year)
assigned U.S. Application No. _____ (if applicable), and as amended
- ☐ under PCT Article 19 on _____ (if applicable)
(day/month/year)
- ☐ under PCT Article 34 on _____ (if applicable)
(day/month/year)
- ☐ and further amended on _____ (if applicable)
(day/month/year)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information which is known by me to be material to the patentability of this application as defined in 37 C.F.R. § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119 (a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America relating to this subject matter having a filing date before that of the application on which priority is claimed:

COUNTRY/REGION (OR PCT)	APPLICATION No.	FILING DATE (day/month/year)	PRIORITY CLAIMED	
Europe (designating DE)	99810442.6	20.05.99	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under 35 U.S.C. § 119 (e) of any United States provisional application(s) listed below:

APPLICATION NO.	FILING DATE (day/month/year)
-----------------	---------------------------------

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) or PCT international application(s) designating the United States listed below and, insofar as the application discloses and claims subject matter in addition to that disclosed in the prior copending application, I acknowledge the duty to disclose all information known by me to be material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. APPLICATION No.	FILING DATE (day/month/year)	STATUS		
		<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
		<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
		<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
		<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
		<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned

PCT APPLICATION No. (designating the U.S.)	INTERNATIONAL FILING DATE (day/month/year)	U.S. APPLICATION No. (if any)	STATUS
			<input type="checkbox"/> Patented
			<input type="checkbox"/> Pending
			<input type="checkbox"/> Abandoned

I hereby appoint the following attorneys and agents, associated with Customer No. 000324, each of them with full power of substitution, revocation and appointment of associates, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

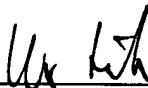
Luther A. R. Hall (Reg. No. 27,337), JoAnn L. Villamizar (Reg. No. 30,598), Kevin T. Mansfield (Reg. No. 31,635), David R. Crichton (Reg. No. 37,300), Michele A. Kovaleski (Reg. No. 37,865) and Tyler A. Stevenson (Reg. No. P46,388).

Address all correspondence associated with Customer No. 000324 to ***Ciba Specialty Chemicals Corporation, Patent Department, 540 White Plains Road, P.O. Box 2005, Tarrytown, NY 10591-9005.***

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole
or first joint inventor **Werner HÖLZL**

Inventor's signature



Date

5.6.00
(day/month/year)

Residence

**4, rue de l'Argent
68440 Eschentzwiller
France**

Citizenship

German

Post Office Address

same as above

Full name of second
joint inventor, if any **Wolfgang HAAP**

Inventor's signature

Wolfgang Haap

Date

5.4.00

(day/month/year)

Residence

**Kirchplatz 12
79639 Grenzach-Wyhlen
Germany**

Citizenship

German

Post Office Address

same as above

Full name of third
joint inventor, if any

Dietmar OCHS

Inventor's signature

Dietmar Ochs

Date

5.4.00

(day/month/year)

Residence

**Webergasse 11g
79650 Schopfheim
Germany**

Citizenship

German

Post Office Address

same as above

Full name of fourth
joint inventor, if any

Karin PUCHTLER

Inventor's signature

Karin Puchter

Date

5.4.00

(day/month/year)

Residence

**Dorfstrasse 8
79592 Fischingen
Germany**

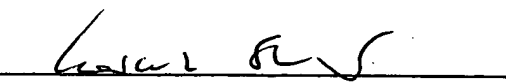
Citizenship

German

Post Office Address

same as above

Full name of fifth
joint inventor, if any **Marcel SCHNYDER**

Inventor's signature  Date 5-4-00
(day/month/year)

Residence **Schulstrasse 11/4
4127 Birsfelden
Switzerland**

Citizenship **Swiss**

Post Office Address **same as above**

Full name of sixth
joint inventor, if any **Surendra Umesh KULKARNI**

Inventor's signature _____ Date _____
(day/month/year)

Residence **E-403 Ciba Colony, Aarey Road
Goregaon (E)
Mumbai-400063
India**

Citizenship **Indian**

Post Office Address **same as above**

Full name of seventh
joint inventor, if any **Arakali Srinivasarao RADHAKRISHNA**

Inventor's signature _____ Date _____
(day/month/year)

Residence **232/13 Snehsadan, IV Main Road
Kempegowda Nagar
Behind Bull Temple Road Tel Exch
Bangalore-560019
India**

Citizenship **Indian**

Post Office Address **same as above**

Full name of eighth joint inventor, if any **Mangesh Shivram SAWANT**

Inventor's signature _____ Date _____
(day/month/year)

Residence **6/12 Narayan Ashram
Dr. Ambedkar Road
Lalbaug
Mumbai-400012
India**

Citizenship **Indian**

Post Office Address **same as above**

Full name of ninth joint inventor, if any **Asawari Bhikaji MAHTRE**

Inventor's signature _____ Date _____
(day/month/year)

Residence **17/276 Adarsh Nagar
Prabhadevi
Mumbai-400025
India**

Citizenship **Indian**

Post Office Address **same as above**

Full name of tenth joint inventor, if any

Inventor's signature _____ Date _____
(day/month/year)

Residence

Citizenship

Post Office Address **same as above**

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		<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
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Full name of sole
or first joint inventor **Werner HÖLZL**

Inventor's signature _____ Date _____
(day/month/year)

Residence **4, rue de l'Argent
68440 Eschentzwiller
France**

Citizenship **German**

Post Office Address **same as above**

Full name of second
joint inventor, if any **Wolfgang HAAP**

Inventor's signature _____ Date _____
(day/month/year)

Residence **Kirchplatz 12
79639 Grenzach-Wyhlen
Germany**

Citizenship **German**

Post Office Address **same as above**

Full name of third
joint inventor, if any **Dietmar OCHS**

Inventor's signature _____ Date _____
(day/month/year)

Residence **Webergasse 11g
79650 Schopfheim
Germany**

Citizenship **German**

Post Office Address **same as above**

Full name of fourth
joint inventor, if any **Karin PUCHTLER**

Inventor's signature _____ Date _____
(day/month/year)

Residence **Dorfstrasse 8
79592 Fischingen
Germany**

Citizenship **German**

Post Office Address **same as above**

Full name of fifth
joint inventor, if any **Marcel SCHNYDER**

Inventor's signature _____

Date _____

(day/month/year)

Residence **Schulstrasse 11/4
4127 Birsfelden
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Citizenship **Swiss**

Post Office Address **same as above**

Full name of sixth
joint inventor, if any **Surendra Umesh KULKARNI**

Inventor's signature _____

Surendra Kulkarni

Date _____

09/04/2000
(day/month/year)

Residence **E-403 Ciba Colony, Aarey Road
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Mumbai-400063
India**

Citizenship **Indian**

Post Office Address **same as above**

Full name of seventh
joint inventor, if any **Arakali Srinivasarao RADHAKRISHNA**

Inventor's signature _____

Arakali S. Radhakrishna
Arakali S. Radhakrishna

Date _____

20/4/2000
20.04.2000
(day/month/year)

Residence **232/13 Snehsadan, IV Main Road
Kempegowda Nagar
Behind Bull Temple Road Tel Exch
Bangalore-560019
India**

Citizenship **Indian**

Post Office Address **same as above**

Full name of eighth
joint inventor, if any

Mangesh Shivram SAWANT

Inventor's signature

Mangesh Shivram Sawant Date 13/04/2000
(day/month/year)

Residence

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Lalbaug
Mumbai-400012
India

Citizenship

Indian

Post Office Address

same as above

Full name of ninth
joint inventor, if any

Asawari Bhikaji MAHTRE

Inventor's signature

Asawari B. Mahate Date 13-4-2000
(day/month/year)

Residence

17/276 Adarsh Nagar
Prabhadevi
Mumbai-400025
India

Citizenship

Indian

Post Office Address

same as above

Full name of tenth
joint inventor, if any

Inventor's signature

Date _____
(day/month/year)

Residence

Citizenship

Post Office Address

same as above